ITYCLASS®



Registration Packet



Welcome to NYCLASS

Thank you for choosing NYCLASS!

This packet contains all the materials necessary to set up your NYCLASS account(s). If you have any questions about the registration process or about your NYCLASS account(s), please do not hesitate to contact us. The NYCLASS Client Service team can be reached any business day from 8:00 a.m. to 5:00 p.m. ET by phone at (855) 804-9980 or by email at clientservices@newyorkclass.org.

Public Trust Advisors, LLC, a registered investment advisor with the U.S. Securities and Exchange Commission, provides investment advisory services to the Fund. PMA Securities, LLC, an affiliate of Public Trust Advisors, is a broker-dealer and municipal advisor registered with the SEC and MSRB and is a member of FINRA and SIPC and provides marketing, and securities and other institutional brokerage services. NYCLASS is not a bank. An investment in NYCLASS is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. Although NYCLASS seeks to preserve the value of your investment at \$1.00 per share, it cannot guarantee it will do so. Please read the applicable NYCLASS Information Statements carefully before making an investment decision. Many factors affect performance including changes in market conditions and interest rates and in response to other economic, political, or financial developments. Investment involves risk including the possible loss of principal. No assurance can be given that the performance objectives of a given strategy will be achieved. Past performance is no guarantee of future results. Any financial and/or investment decision may incur losses.



Registration Procedures

To join NYCLASS, please complete the following:

- 1. Read the Municipal Cooperation Agreement (located in the Document Center at www.newyorkclass.org).
- 2. Pass the resolution authorizing participation in NYCLASS (page 3).
- 3. Complete the Entity Registration (page 4).
- 4. Complete the Authorized Contacts Form (pages 5/6). NYCLASS recommends having multiple authorized signers to help prevent fraud.
- 5. Complete the Accounts to be Established Form (page 7); you may open as many accounts as you wish.
- 6. Keep the original forms for your records and send the completed packet to the NYCLASS Client Service team by fax (855) 804-9981 or by email <u>clientservices@newyorkclass.org</u>.

Questions? Please contact us; we would love to hear from you:

NYCLASS Client Service Team T (855) 804-9980 clientservices@newyorkclass.org

Through the NYCLASS website, www.newyorkclass.org, Participants will be regularly informed of important program information, holidays, upcoming Board meetings, Participant events, conferences, and more. Governing Board meetings, which are open to the public, are generally held quarterly and discuss relevant issues to the governance and operations of the NYCLASS program.



Municipal Cooperation Resolution

WHEREAS, New York General Municipal Law, Article 5-G, Section 119-o (Section 119-o) empowers municipal corporations [defined in Article 5-G, Section 119-n to include school districts, boards of cooperative educational services, counties, cities, towns and villages, and districts] to enter into, amend, cancel, and terminate agreements for the performance among themselves (or one for the other) of their respective functions, powers, and duties on a cooperative or contract basis;

WHEREAS the ________ wishes to invest portions of its available investment funds in cooperation with other corporations and/or districts pursuant to the NYCLASS Municipal

Cooperation Ag	reement Amended and Restate	ed as of August 1, 2023;	
WHERE <i>A</i>	S theEntity Nan	wishes to satisfy the safety and I	iquidity
needs of their f	unds;		
Now, the	erefore, it is hereby resolved a	s follows:	
That	Contact Name		_ 0
	is her	reby authorized to participate in the NYCLASS program	າ unde
the terms of the	e NYCLASS Municipal Cooperat	cion Agreement Amended and Restated as of August 1,	, 2023.
Contact Signatu	ıre	Title	
Printed Name		 Date	



Entity Information

Fund Registration

Entity Name (Pa	rticipant)			
Entity Type:	City/Town/Village	County	School District	Fire District
	Other (Specify)			
Mailing Address				
City		Zip	County	
Physical Address	s (if different than above)			
City		Zip	County	
Tax ID	Fiscal Y	ear End Date (Month/Day)	
each Indemnified Par proceeds can be sent responsible for notify Wires will be distribut Administrator. Additi- 5:00 p.m. ET, conti Banking Inforr	ty from and against any and all L tonly to the bank(s) indicated be ring NYCLASS of any changes to ted every hour with the final distronally, NYCLASS must be notified ribution orders will be voided mation	osses arising from o elow unless otherwi its account(s). ribution ending at 1 d of any contributio	sult from accepting such instructions, and or resulting from such reliance on, or acceptive amended in the NYCLASS Online Trans 2:00 p.m. ET; distribution times are subjections by 12:00 p.m. ET to receive same day	otance of, such instructions. Withdraw action Portal. Each Participant is ct to change as needed by the NYCLAS
Bank Name			Bank Routing Number (ABA)	
Account Title			Account Number	
Bank Contact* _			Contact's Phone Number	
Wire	ACH	Both		
Additional Ban	king Information (Opti	ional)		
Bank Name			Bank Routing Number (ABA)	
Account Title			Account Number	
Bank Contact* _			Contact's Phone Number	
Wire	ACH	Both		
*If there will onl	ly be one Authorized Sign	er on the NYCI	ASS account, bank contact mus	t be provided to verify bank

account information



Authorized Contacts¹

Authorized Signers Can	Read-Only Users Can	
Approve changes to the Investor Profile	Receive account updates	
Update banking/contact information	Request "view-only" access to monthly statements and transaction confirmations	
Process transactions		
Receive account updates	View banking/contact information	
Key Contact ² and Authorized Signer		
Print First and Last Name	Title	
Signature Required	Phone (Required) ³ Extension	
Email (Required)	Moblie ³	
Print First and Last Name	Title	
(Signature Required if Authorized Signer)	Phone (Required) ³ Extension	
Email (Required)	Mobile ³	
Permissions (check only one)		
Authorized Signer to Move Funds		
Read-Only Access		
Additional Contact (Optional)		
Print First and Last Name	Title	
(Signature Required if Authorized Signer)	Phone (Required) ³ Extension	
Email (Required)	Mobile ³	
Permissions (check only one)		
Authorized Signer to Move Funds		
Read-Only Access		

¹ All contacts listed on an account will receive email notifications when transaction confirmation documents and monthly statements are available for download in the online portal.

² The key contact on an account is the main point of contact for an entity. They receive voting credentials for Governing Board elections and all other important communications.

³ A phone number that you can be reached at directly is required to receive the multi-factor authentication code via phone call. Mobile numbers can receive the code via phone call or text.



Additional Contact (Optional)

Authorized Contacts (cont.)¹

Print First and Last Name	Title	
(Signature Required if Authorized Signer)	Phone (Required) ²	Extension
Email (Required)	Mobile ²	
Permissions (check only one)		
Authorized Signer to Move Funds		
Read-Only Access		
Additional Contact (Optional)		
Print First and Last Name	Title	
(Signature Required if Authorized Signer)	Phone (Required) ²	Extension
Email (Required)	Mobile ²	
Permissions (check only one)		
Authorized Signer to Move Funds		
Read-Only Access		
Additional Contact (Optional)		
Print First and Last Name	Title	
(Signature Required if Authorized Signer)	Phone (Required) ²	Extension
Email (Required)	Mobile ²	
Permissions (check only one)		
Authorized Signer to Move Funds		
Read-Only Access		

 $^{^{1}}$ All contacts listed on an account will receive email notifications when transaction confirmation documents and monthly statements are available for download in the online portal.

² A phone number that you can be reached at directly is required to receive the multi-factor authentication code via phone call. Mobile numbers can receive the code via phone call or text.



Accounts to be Established

Entity Name:	
Desired Subaccount Name(s)* i.e. General Fund	
(To be completed by Participant, at least one S	
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	-

Once your NYCLASS account has been established, you will receive a confirmation email with your login credentials from no-reply@newvorkclass.org. If you do not receive your login credentials within 48 business hours of submission, please first check your junk or spam folder before calling the NYCLASS Client Service team.

^{*}Name must be limited to 35 characters



Dual Authorization Form (Optional)

Entity Name:	
ensures that any transaction entered via the NYCLASS of Authorized Signer in order to be processed (interna	apabilities on your NYCLASS account. Dual authorization online transaction portal requires approval from a second of transfers between subaccounts do not require dual ne account can enter transactions and approve them (not
Request to Add D	Qual Authorization
below. By approving dual authorization, the Authorized	by the Authorized Signer Signer acknowledges that transactions not approved by ensure transactions are entered in a timely manner and ne transactions for processing.
Authorized Signer's Signature	Date
Printed Name	Title